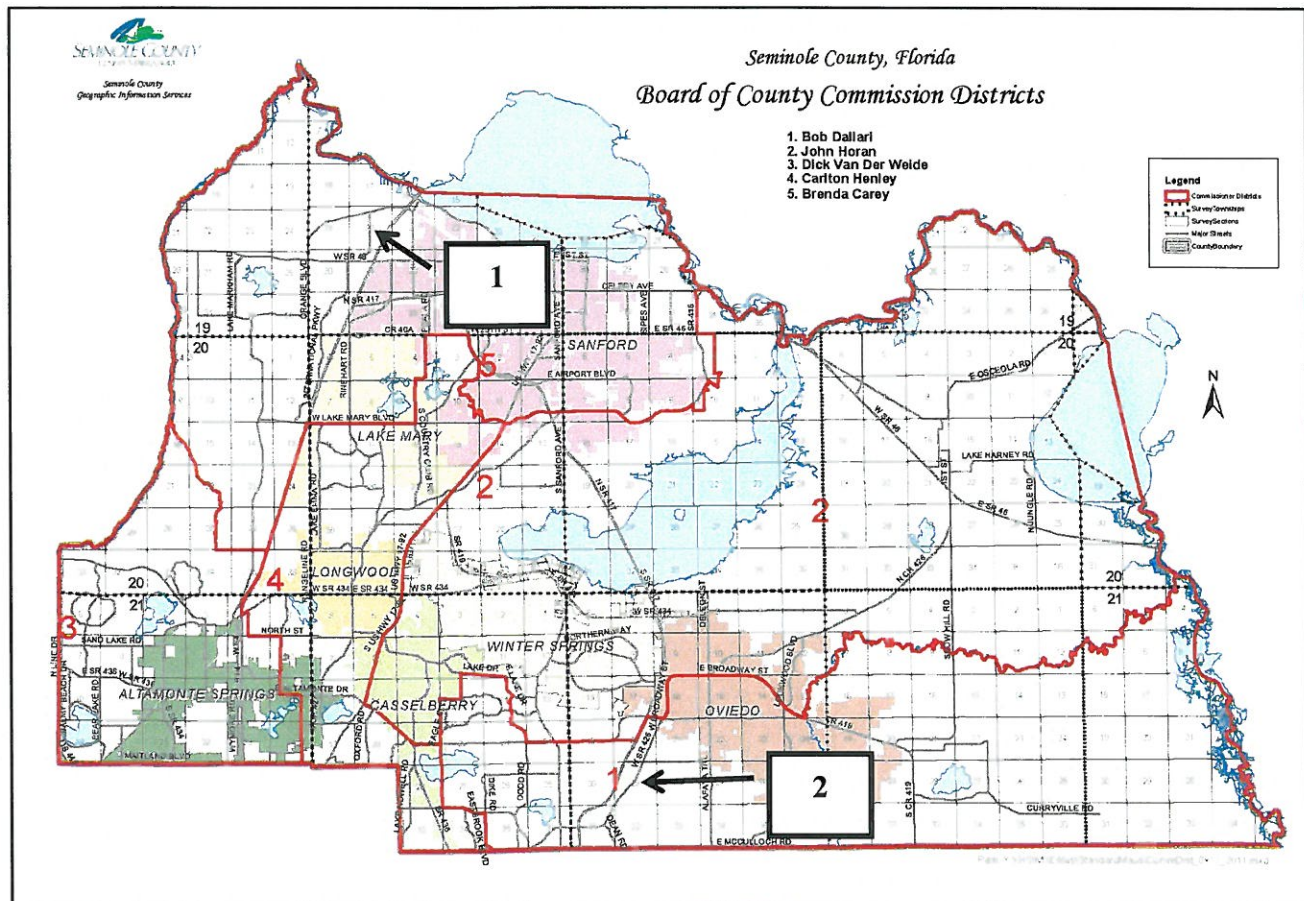


SEMINOLE COUNTY GOVERNMENT

1101 EAST FIRST STREET
SANFORD, FLORIDA 32771
(407) 665-7331

www.seminolecountyfl.gov

To: Applicants, Staff and Interested Parties
From: Economic and Community Development Services, Planning & Development Division
Subject: **DEVELOPMENT REVIEW COMMITTEE MEETING FOR WEDNESDAY 12/19/2012**



County staff and applicants will review the following items on the above date at the time scheduled below. The meeting will be held in **Room #3024** on the third floor of the County Services Building.

| | | | | | |
|---------------------|---|------------------------|--------------------|---------------------|-----------------------|
| ITEM NO: 1 | DR - SUBDIVISIONS | PROJ NO | 12-05500017 | TIME | 9:00 AM |
| PROJECT NAME | SILVERLEAF PARK PSP / FS - FINAL ENGINEER | PROJECT MANAGER | | BRIAN WALKER | (407) 665-7337 |
| APPLICANT | KB HOMES ORLANDO LLC | JEREMY CAMP | | (407) 587-3479 | |
| CONSULTANT | MADDEN MOORHEAD & GLUNT | DAVID A. STOKES, P.E. | | (407) 629-8330 | |
| PROJECT DESC | FINAL ENGINEERING SUBDIVISION APPROVAL FOR 114 SINGLE FAMILY LOTS | | | | |
| LOCATION | EAST SIDE OF NORTH OREGON ST & WEST OF SR 46 | | | | |
| PARCEL ID | 20-19-30-300-004F-0000 | | | | |
| BCC DISTRICT | 5-CAREY | | | | |

| | | | | | |
|--------------|---|-----------------|--------------------------------|----------------|---------|
| ITEM NO: 2 | PZ - REZONE (EXCL PUD/PCD) | PROJ NO | 12-20000006 | TIME | 9:20 AM |
| PROJECT NAME | CONNECTION POINT (2530) REZONE | PROJECT MANAGER | JOY WILLIAMS (407) 665-7399 | | |
| APPLICANT | DAVID L. EVANS, P.E. | | | (407) 365-6666 | |
| PROJECT DESC | PROPOSED REZONE FROM A-1 & C-2 TO C-3 ON 6.32 ACRES CHANGES TO BE USED AS A VEHICLE STORAGE | | | | |
| LOCATION | EAST OF SR 417 ON CONNECTION POINT RD | | | | |
| PARCEL ID | 29-21-31-300-009A-0000+ | | | | |
| BCC DISTRICT | 1-DALLARI | | | | |

Notice to Applicant: A copy of the staff comments and recommendations will be faxed to the applicant and the consultant **by 12:00 noon on the Tuesday before the scheduled meeting**. If you have any questions, please contact the Planning and Development Division at (407) 665-7331. **If you intend to have an attorney present, please notify your project manager before meeting date.**

After review of the comments, the applicant may not need to meet with the staff in a group. If so, please contact the Planning and Development Division so the agenda may be adjusted accordingly.

Thank you.



SEMINOLE COUNTY GROWTH MANAGEMENT
PLANNING & DEVELOPMENT DIVISION
1101 EAST FIRST STREET ROOM 2028
SANFORD, FL 32771
(407) 665-7441 PHONE (407) 665-7385 FAX
www.seminolecountyfl.gov/gm

12-05500017

APPLICANT INFORMATION

| | |
|---|---|
| APPLICANT: KB Home Orlando, LLC | CONTACT: Jeremy Camp |
| ADDRESS: 9102 S. Park Center Loop, Ste. 100 | |
| CITY: Orlando | STATE: FL ZIP: 32819 |
| PHONE: 407-587-3497 | FAX: 407-587-2329 EMAIL: jcamp@kbhome.com |

CONSULTANT INFORMATION

| | |
|--|---|
| ENGINEER/SURVEYOR: Madden, Moorhead + Gunt, Inc. | CONTACT: David A. Stokes, P.E. |
| ADDRESS: 431 E. Horatio Ave., Ste. 260 | |
| CITY: Maitland | STATE: FL ZIP: 32751 |
| PHONE: 407-629-8330 | FAX: 407-629-8336 EMAIL: dstokes@madden-eng.com |

OWNER INFORMATIONIS OWNER'S AUTHORIZATION ATTACHED? YES ☐ NO ☐

| | |
|--------------------------|-------------|
| OWNER: Same As Applicant | CONTACT: |
| ADDRESS: | |
| CITY: | STATE: ZIP: |
| PHONE: | FAX: EMAIL: |

SUBDIVISION INFORMATION

| |
|---|
| PARCEL ID #: 20-19-30-300-004F-0000, 20-19-30-300-004G-0000 |
| PROJECT NAME: Silverleaf Park |
| DESCRIPTION OF PROJECT: 114 lots single family residential |
| LOCATION: N. Oregon Avenue |
| NUMBER OF LOTS: TOTAL ACREAGE: 28.25 |
| ZONING: PUD FUTURE LAND USE: |

UTILITIES

| | |
|---|--|
| WATER PROVIDER: Seminole County | SEWER PROVIDER: Seminole County |
| IS PROPERTY SERVED BY WELL? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | |
| IS PROPERTY SERVED BY SEPTIC? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | FEE ATTACHED: YES <input type="checkbox"/> NO <input type="checkbox"/> |

ARBOR

| |
|--|
| ARE ANY TREES BEING REMOVED? YES <input type="checkbox"/> NO <input type="checkbox"/> |
| ARBOR PERMIT APPLICATION ATTACHED: YES <input type="checkbox"/> NO <input type="checkbox"/> FEE ATTACHED: YES <input type="checkbox"/> NO <input type="checkbox"/> |

Final Engineering Plan

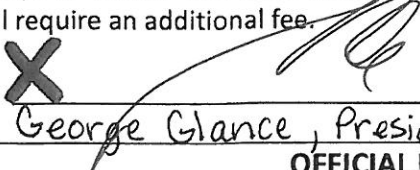
FEES

- ☐ DEVELOPMENT PLAN --- \$250.00 + \$5.00 PER LOT
- ☐ PRELIMINARY PLAN --- \$1,000.00 + \$15.00 PER LOT (\$2,270.00 MAXIMUM FEE)
- ☒ FINAL ENGINEERING PLAN --- \$3,500.00 + \$25.00 PER LOT ^{114 LOTS} (\$5,300.00 MAXIMUM FEE)
- ☐ FINAL PLAT ASSOCIATED WITH FINAL ENGINEERING --- \$200.00*
- *A PLAT SUBMITTED AS A SEPARATE REVIEW FROM THE FINAL ENGINEERING REQUIRES A \$200.00 FEE FOR EACH SUBMITTAL
- ☐ FINAL PLAT --- (IF NO FINAL ENGINEERING IS REQUIRED) \$1,750.00 + \$25.00 PER LOT
- ☐ MINOR PLAT ---- \$1,000.00 + \$75.00 PER LOT (MAXIMUM 4 LOTS/RESIDENTIAL – MAXIMUM 2 LOTS/COMMERCIAL)

CONCURRENCY REVIEW MANAGEMENT SYSTEM: (Please check one.)

- ☐ I elect to defer the Concurrency Review determination for the above listed property until a point as late as Final Engineering Submittal. (Minor Plat and Final Engineering require Concurrency Test Review.) I further specifically acknowledge that any proposed development on the subject property will be required to undergo Concurrency Review and meet all Concurrency requirements in the future.
- ☒ I hereby declare and assert that the aforementioned proposal and property described are covered by a valid previously issued and unexpired Certificate of Vesting or prior Concurrency determination as identified below: (Please attach a copy of the Certificate of Vesting or Prior Test/Concurrency Notice.)
Vesting Certificate/Test Notice Number: _____ Date issued: _____
- ☐ Concurrency Application and appropriate fee is attached. I wish to encumber capacity at an early point in the development process and understand that only upon approval of the development order and full payment of applicable facility reservation fees is a Certificate of Concurrency issued and entered into the Concurrency Management Monitoring System.

I understand that the application for subdivision plan review must include all required submittals as specified in Chapter 35, Part 4, of the Seminole County Land Development Code. Submission of incomplete plans may create delays in review and plan approval. The review fee provides for two plan reviews. Additional reviews will require an additional fee.

Applicant's Signature:  Date: 10/26/12

George Glance, President

| OFFICIAL USE | |
|--------------|-------------------|
| PROJECT #: | PLANNER ASSIGNED: |

RECEIVED NOV 19 2012

SEMINOLE COUNTY GROWTH MANAGEMENT DEPARTMENT



PLANNING & DEVELOPMENT DIVISION
1101 EAST FIRST STREET ROOM 2028
SANFORD, FL 32771
(407) 665-7441 PHONE
(407) 665-7385 FAX

APPL # 2012-036
PROJ # 12-20000006
FLUA # _____

**APPLICATION TO THE SEMINOLE COUNTY
PLANNING & ZONING COMMISSION / LOCAL PLANNING AGENCY AND BOARD OF COMMISSIONERS**

Applications to the Seminole County Planning & Zoning Commission / Local Planning Agency and Board of County Commissioners shall include **all applicable items listed in the Application Submittal Checklist**. No application will be scheduled for Development Review Committee (DRC) consideration until a complete application (including all information requested below) has been received by the Growth Management Department, Planning & Development Division.

APPLICATION SUBMITTAL CHECKLIST:

****THIS BOX FOR STAFF USE ONLY****

- ☐ COPY OF PRE-APPLICATION REVIEW INFORMATION, IF APPLICABLE
- ☐ PROPERTY OWNER PRINTOUT FROM PROPERTY APPRAISER'S WEBSITE
- ☒ PROPERTY OWNER'S AUTHORIZATION FORM (ADDITIONAL DOCUMENTATION REQUIRED IF OWNER IS A TRUST OR CORPORATION)
- ☒ OWNERSHIP DISCLOSURE FORM
- ☒ SCHOOL IMPACT ANALYSIS (CONTACT SCHOOL BOARD FOR APPLICATION)
- ☒ CONCURRENCY APPLICATION/DEFERRAL AFFIDAVIT AND FEE IF REQUIRED \$ _____
- ☐ BOUNDARY SURVEY (2 COPIES)
- ☐ ELECTRONIC LEGAL DESCRIPTION IN DIGITAL WORD FORMAT (COMPACT DISK OR EMAIL ONLY)
- ☐ PUD/PCD FINAL MASTER/SITE PLAN REQUIRES A DRAFT DCA IN DIGITAL WORD FORMAT (COMPACT DISK OR EMAIL ONLY)
- ☐ REZONING TO PUD, PCD, OP, RP, RM-2, RM-3, R-3, R-3A, R-4 AND MYRTLE STREET CONSERVATION VILLAGE REQUIRES 16 FULL-SIZE SETS OF SITE PLANS OR MASTER PLANS AND AN 11" X 17" PDF FILE (COMPACT DISK OR EMAIL ONLY)
- ☐ APPLICATION FEE \$ 2,490.00
- SIGNATURE OF STAFF PROJECT MANAGER CERTIFYING THAT THE APPLICATION IS SUFFICIENT

APPLICATION TYPE - PLEASE CHECK ALL THAT APPLY

- ☐ LARGE SCALE FUTURE LAND USE AMENDMENT (LSFLUA) FROM: _____ TO: _____
- ☐ SMALL SCALE FUTURE LAND USE AMENDMENT (SSFLUA) FROM: _____ TO: _____
- ☐ PLANNED DEVELOPMENT AMENDMENT TO EXISTING PD (LS/SSFLUA) FROM: _____ TO: _____

[NOTE: ATTACHMENT "A" AND ALL SUPPORT MATERIALS MUST BE SUBMITTED FOR LAND USE AMENDMENTS ABOVE]

- ☒ REZONING (WITHOUT SITE PLAN) FROM: A-1 & C-2 TO: C-3
- ☐ REZONING TO PUD, PCD, OP, RP, RM-2, RM-3, R-3, R-3A, or R-4 FROM: _____ TO: _____
- ☐ PUD/PCD MAJOR AMENDMENT
- ☐ PUD/PCD MINOR AMENDMENT
- ☐ PUD FINAL MASTER PLAN
- ☐ DEVELOPMENT OF REGIONAL IMPACT NOPC
- ☐ MYRTLE STREET CONSERVATION VILLAGE

| PROPERTY OWNER / AUTHORIZED AGENT INFORMATION | | |
|---|---|---------------------------|
| NAME | PROPERTY OWNER | AUTHORIZED AGENT * |
| Lucille R. Thompson | Lucille Thompson | David L. Evans, P.E. |
| IF THE OWNER IS A CORPORATION OR TRUST, GIVE THE <u>NAME AND TITLE</u> OF THE PERSON WHO CAN LEGALLY SIGN ON BEHALF OF THE CORPORATION AND PROVIDE DOCUMENTATION THAT THEY HAVE LEGAL AUTHORITY : | | |
| ADDRESS | 2530 Connection Point Oviedo, FL 32765 | |
| PHONE 1 | 407-365-6666 | |
| PHONE 2 | | |
| FAX | 407-365-9358 | |
| E-MAIL | | |
| If you have a consultant that is not listed on the application and you would like us to contact them directly and give them the DRC comments, provide their contact information on a separate sheet, otherwise any questions and/or comments will be directed to the property owner or authorized agent listed above. | | |

* Proof of property owner's authorization is required with submittal if signed by authorized agent.

NAME AND PHONE NUMBER OF PERSON WHO WILL POST PLACARD _____

| PROJECT INFORMATION | |
|------------------------------|--|
| PROJECT NAME | Fenced Vehicle Storage Lot for Automobiles, Trailers, Trucks, RV's, Semi-Tractor Trailers and Boats. |
| SITE ADDRESS | 2530 Connection Point, Oviedo, FL 32765 |
| BCC DISTRICT | 1 - Dallari |
| EXISTING USE(S) | Residential |
| PROPOSED USE(S) | Vehicle Storage Lot |
| PROPERTY ID NUMBER(S) | 29-21-31-300-009A-0000, 29-21-31-300-009B-0000, 29-21-31-300-0090-0000, 29-21-31-300-010A-0000 |
| SIZE OF PROPERTY | 6.32 acres |
| GENERAL LOCATION | East of SR417 on Connection Point Road |
| SOURCE OF WATER | Seminole County |
| SOURCE OF SEWER | Seminole County |
| RECLAIM PROVIDER | N/A |
| | |

**SEMINOLE COUNTY APPLICANT AUTHORIZATION FORM
(ORIGINAL ONLY)**

An authorized applicant is defined as:

The property owner of record; or
An agent of said property owner (power of attorney to represent and bind the property owner must be submitted with the application); or
Contract purchaser (a copy of a fully executed sales contract must be submitted with the application containing a clause or clauses allowing an application to be filed).

I, Lucille R. Thompson, the fee simple owner of the following
(Owner's Name)

described property (Provide Legal Description or Tax Parcel ID Number(s) 29-21-31-300-009A-0000
29-21-31-300-009B-000, 29-21-300-0090-0000, 29-21-31-300-010A-0000

hereby affirm that David L. Evans, P.E. is hereby designated to act as my / our
authorized agent for the filing of the attached application for:

CIRCLE ONE: Development Plan; Special Exception; Variance; Vacate; Special Event Permit; Temporary Use Permit;
Arbor Permit.

and make binding statements and commitments regarding the request.

Lucille R. Thompson
Owner's Signature

I certify that I have examined the application and that all statements and diagrams submitted are true and accurate to the best of my knowledge. Further, I understand that this application, attachments and fees become part of the Official Records of Seminole County, Florida and are not returnable.

State of Florida
County of Seminole

SWORN TO AND SUBSCRIBED before me this 5th day of Nov., 2012.

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared Lucille R. Thompson who is personally known to me or who has produced N/A as identification and who executed the foregoing instrument and sworn an oath.

WITNESS my hand and official seal in the County and State last aforesaid this 5th day of Nov., 2012.

Sharon S. Perkins
Notary Public in and for the County and State
Aforesaid

My Commission Expires: December 6, 2013

SEMINOLE COUNTY
APPLICATION & AFFIDAVIT

Ownership Disclosure Form

The owner of the real property associated with this application is a (check one)

- ☒ Individual ☐ Corporation ☐ Land Trust
☐ Limited Liability Company ☐ Partnership
☐ Other (describe): _____

1. List all **natural persons** who have an ownership interest in the property, which is the subject matter of this petition, by name and address.

| NAME | ADDRESS | PHONE NUMBER |
|---------------------|-------------------------|--------------------------------------|
| Lucille R. Thompson | 419 Palm De Oro Dr, FL. | 407-365-6666 or 407-542-4673 Home |
| | | |

(Use additional sheets for more space.)

2. For each **corporation**, list the name, address, and title of each officer; the name and address of each director of the corporation; and the name and address of each shareholder who owns two percent (2%) or more of the stock of the corporation. Shareholders need not be disclosed if a corporation's stock are traded publicly on any national stock exchange.

| NAME | TITLE OR OFFICE | ADDRESS | % OF INTEREST |
|------|-----------------|---------|---------------|
| | | | |
| | | | |
| | | | |

(Use additional sheets for more space.)

3. In the case of a **trust**, list the name and address of each trustee and the name and address of the beneficiaries of the trust and the percentage of interest of each beneficiary. If any trustee or beneficiary of a trust is a corporation, please provide the information required in paragraph 2 above.

Trust Name: _____

| NAME | TRUSTEE OR BENEFICIARY | ADDRESS | % OF INTEREST |
|------|------------------------|---------|---------------|
| | | | |
| | | | |
| | | | |

(Use additional sheets for more space.)

4. For **partnerships**, including limited partnerships, list the name and address of each principal in the partnership, including general or limited partners. If any partner is a corporation, please provide the information required in paragraph 2 above.

| NAME | ADDRESS | % OF INTEREST |
|------|---------|---------------|
| | | |
| | | |
| | | |

(Use additional sheets for more space.)

5. For each limited liability company, list the name, address, and title of each manager or managing member; and the name and address of each additional member with two percent (2%) or more membership interest. If any member with two percent (2%) or more membership interest, manager, or managing member is a corporation, trust or partnership, please provide the information required in paragraphs 2, 3 and/or 4 above.

Name of LLC: _____

| NAME | TITLE | ADDRESS | % OF INTEREST |
|------|-------|---------|---------------|
| | | | |
| | | | |
| | | | |

(Use additional sheets for more space.)

6. In the circumstances of a contract for purchase, list the name and address of each contract purchaser. If the purchaser is a corporation, trust, partnership, or LLC, provide the information required for those entities in paragraphs 2, 3, 4 and/or 5 above.

Name of Purchaser: _____

| NAME | ADDRESS | % OF INTEREST |
|------|---------|---------------|
| | | |
| | | |
| | | |

Date of Contract: _____

Please specify any contingency clauses related to the outcome of the consideration of the application.

6. As to any type of owner referred to above, a change of ownership occurring subsequent to this application, shall be disclosed in writing to the Planning and Development Director prior to the date of the public hearing on the application.
7. I affirm that the above representations are true and are based upon my personal knowledge and belief after all reasonable inquiry. I understand that any failure to make mandated disclosures is grounds for the subject rezoning, future land use amendment, special exception, or variance involved with this Application to become void. I certify that I am legally authorized to execute this Application and Affidavit and to bind the Applicant to the disclosures herein.

Nov 5, 2012

Date

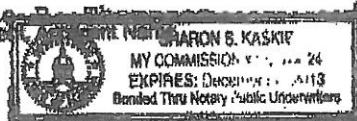
Lucille R. Thompson
Owner, Agent, Applicant Signature

STATE OF FLORIDA

COUNTY OF Seminole

Sworn to (or affirmed) and subscribed before me by Lucille R. Thompson on this 5th day of Nov, 2012.

Owner, Agent



Sharon S. Kaskie
Signature of Notary Public

Print, Type or Stamp Name of Notary Public

Personally Known _____ OR Produced Identification _____

Type of Identification Produced N/A

CONCURRENCY REVIEW MANAGEMENT SYSTEM (PLEASE CHECK ONE)

X

I elect to defer the Concurrency Review that is required by Chapter 163, Florida Statutes, per Seminole County's Comprehensive Plan for the above listed property until a point as late as Site Plan and/or Final Engineering submittals for this proposed development plan. I further specifically acknowledge that any proposed development on the subject property will be required to undergo Concurrency Review and meet all Concurrency requirements in the future. PCD Final Site Plan/PCD Final Site Plan Amendment may not defer.

I hereby declare and assert that the aforementioned proposal and property described are covered by a valid previously issued Certificate of Vesting or a prior Concurrency determination (Test Notice issued within the past (two years) as identified below: (Please attach a copy of the Certificate of Vesting or Test Notice.)

TYPE OF CERTIFICATE:

CERTIFICATE NUMBER:

DATE ISSUED:

VESTING:

CV- _____

TEST NOTICE:

Concurrency Application and appropriate fee are attached. I wish to encumber capacity at an early point in the development process and understand that only upon approval of the development order and the full payment of applicable facility reservation fees is a Certificate of Concurrency issued and entered into the Concurrency Management monitoring system.

By my signature hereto, I do hereby certify that the information contained in this application is true and correct to the best of my knowledge, and understand that deliberate misrepresentation of such information may be grounds for denial or reversal of this application and / or revocation of any approval based upon this application.

I hereby authorize County staff to enter upon the subject property at any reasonable time for the purposes of investigating and reviewing this request. I also hereby agree to place a public notice sign (placard) on the subject property at a location(s) to be determined by County staff.

I further acknowledge that Seminole County may not defend any challenge to my proposed future land use amendment / rezoning and related development approvals, and that it may be my sole obligation to defend any and all actions and approvals, which authorize the use or development of the subject property. Submission of this form initiates a process and does not imply approval by Seminole County or any of its boards, commissions or staff.

I further acknowledge that I have read the information contained in this application form pertaining to proposed amendments to the official zoning map, official Future Land Use map, and / or comprehensive plan and have had sufficient opportunity to inquire with regard to matters set forth therein and, accordingly, fully understand all applicable procedures and matters relating to this application.

I hereby represent that I have the lawful right and authority to file this application.

Lucille R. Thompson
SIGNATURE OF AUTHORIZED APPLICANT*

Nov 5, 2011
DATE

* Proof of property owner's authorization is required with submittal if signed by someone other than the property owner.

Lucille Thompson
PRINT OR TYPE NAME



Parcel: 29-21-31-300-0090-0000

Owner: THOMPSON SAM & LUCILLE

Property Address: 2536 CONNECTION PT OVIEDO, FL 32765

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Parcel: 29-21-31-300-0090-0000

Value Summary

Property Address: 2536 CONNECTION PT

Owner: THOMPSON SAM & LUCILLE

Mailing: 2530 CONNECTION PT
OVIEDO, FL 32765

Subdivision Name: {View Plat}

Tax District: 01-COUNTY-TX DIST 1

Exemptions:

DOR Use Code: 41-LIGHT MANUFACTURING

| | 2013 Working Values | 2012 Certified Values |
|-----------------------------|---------------------|-----------------------|
| Valuation Method | Cost/Market | Cost/Market |
| Number of Buildings | 1 | 1 |
| Depreciated Bldg Value | \$58,977 | \$60,300 |
| Depreciated EXFT Value | \$4,577 | \$4,577 |
| Land Value (Market) | \$108,256 | \$108,256 |
| Land Value Adj | | |
| <u>Just/Market Value **</u> | \$171,810 | \$173,133 |
| Portability Adj | | |
| Save Our Homes Adj | \$0 | \$0 |
| Amendment 1 Adj | \$0 | \$0 |
| Assessed Value | \$171,810 | \$173,133 |

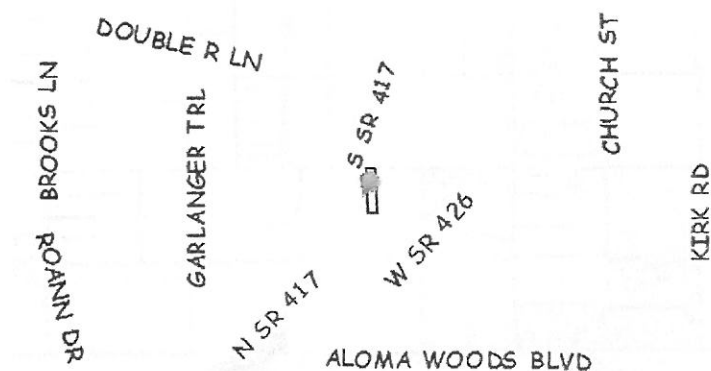
Tax Amount without SOH: \$2,661

| | |
|----------------------|---------|
| 2012 Tax Bill Amount | \$2,661 |
|----------------------|---------|

Tax Estimator

Save Our Homes Savings: \$0

* Does NOT INCLUDE Non Ad Valorem Assessments



| | | | | | | | |
|------------|--------|--------------------------|-----------|---|---|---------|--------|
| Map | Aerial | Both | Footprint | + | - | Extents | Center |
| Larger Map | | Dual Map View - External | | | | | |

Legal Description

LEG SEC 29 TWP 21S RGE 31E W 131.8 FT OF E 790.8 FT OF N 1/2 OF NW 1/4 OF SW 1/4

Tax Details

| Taxing Authority | Assessment Value | Exempt Values | Taxable Value |
|------------------------------------|------------------|---------------|---------------|
| County General Fund | \$171,810 | \$0 | \$171,810 |
| Schools | \$171,810 | \$0 | \$171,810 |
| Fire | \$171,810 | \$0 | \$171,810 |
| Road District | \$171,810 | \$0 | \$171,810 |
| SJWM(Saint Johns Water Management) | \$171,810 | \$0 | \$171,810 |
| County Bonds | \$171,810 | \$0 | \$171,810 |

Sales

| Deed | Date | Book | Page | Amount | Vac/Imp | Qualified |
|------|------|------|------|--------|---------|-----------|
| | | | | | | |

Find Comparable Sales within this Subdivision

Land

| Method | Frontage | Depth | Units | Unit Price | Land Value |
|---------|----------|-------|-------|------------|------------|
| ACREAGE | 0 | 0 | 1,990 | 54,400.00 | \$108,256 |

Building Information

| # | Description | Year Built | Stories | Total SF | Ext Wall | Adj Value | Repl Value | Appendages |
|---|------------------|------------|---------|----------|--------------------------|-----------|------------|--|
| 1 | MASONRY PILASTER | 1974 | 1 | 1,859.00 | CONCRETE BLOCK - MASONRY | \$58,977 | \$105,739 | Descriptic A UTILITY FINISHED 136 UTILITY UNFINISHED 172 OPEN PORCH 756 UNFINISHED |

Permits

| Permit # | Type | Agency | Amount | CO Date | Permit Date |
|----------|-----------------------|--------|---------|---------|-------------|
| 13278 | Addition - Commercial | County | \$2,250 | | 12/19/2007 |

Extra Features

| Description | Year Blt | Units | Value | Cost New |
|----------------------|----------|-------|---------|----------|
| PATIO CONC COMM | 1979 | 2,687 | \$3,558 | \$8,894 |
| POLE/BARN, BELOW AVG | 1979 | 728 | \$1,019 | \$2,548 |

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Parcel: 29-21-31-300-009A-0000

Owner: THOMPSON SAMUEL & LUCILLE

Property Address: 2530 CONNECTION PT OVIEDO, FL 32765

[< Back](#) [Save Layout](#) [Reset Layout](#) [New Search](#)

Parcel: 29-21-31-300-009A-0000

Value Summary

Property Address: 2530 CONNECTION PT

Owner: THOMPSON SAMUEL & LUCILLE

Mailing: 2530 CONNECTION PT
OVIEDO, FL 32765Subdivision Name: [\[View Plat\]](#)

Tax District: 01-COUNTY-TX DIST 1

Exemptions:

DOR Use Code: 48-WAREHOUSE-DISTR & STORAGE

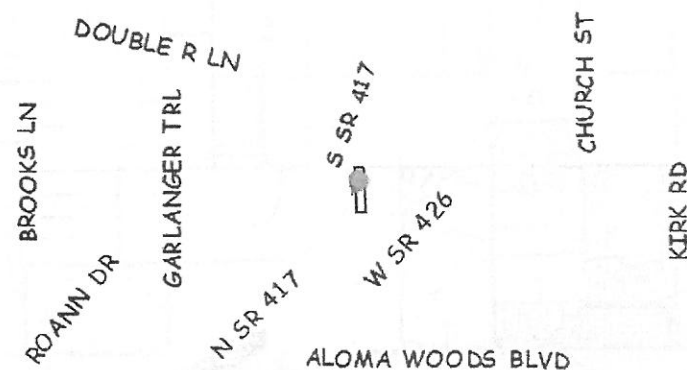
| | 2013 Working Values | 2012 Certified Values |
|------------------------|---------------------|-----------------------|
| Valuation Method | Cost/Market | Cost/Market |
| Number of Buildings | 1 | 1 |
| Depreciated Bldg Value | \$5,473 | \$5,473 |
| Depreciated EXFT Value | \$571 | \$571 |
| Land Value (Market) | \$215,724 | \$215,724 |
| Land Value Adj | | |
| Just/Market Value ** | \$221,768 | \$221,768 |
| Portability Adj | | |
| Save Our Homes Adj | \$0 | \$0 |
| Amendment 1 Adj | \$0 | \$0 |
| Assessed Value | \$221,768 | \$221,768 |

Tax Amount without SOH: \$3,409

2012 Tax Bill Amount \$3,409**Tax Estimator**

Save Our Homes Savings: \$0

* Does NOT INCLUDE Non Ad Valorem Assessments


[Map](#) [Aerial](#) [Both](#) [Footprint](#) [+](#) [-](#) [Extents](#) [Center](#)
[Larger Map](#) [Dual Map View - External](#)

Legal Description

LEG SEC 29 TWP 21S RGE 31E W 131.8 FT OF E 659 FT OF N 1/2 OF NW 1/4 CF SW 1/4

Tax Details

| Taxing Authority | Assessment Value | Exempt Values | Taxable Value |
|------------------------------------|------------------|---------------|---------------|
| County General Fund | \$221,768 | \$0 | \$221,768 |
| Schools | \$221,768 | \$0 | \$221,768 |
| Fire | \$221,768 | \$0 | \$221,768 |
| Road District | \$221,768 | \$0 | \$221,768 |
| SJWM(Saint Johns Water Management) | \$221,768 | \$0 | \$221,768 |
| County Bonds | \$221,768 | \$0 | \$221,768 |

Sales

| Deed | Date | Book | Page | Amount | Vac/Imp | Qualified |
|------|------|------|------|--------|---------|-----------|
| | | | | | | |

[Find Comparable Sales within this Subdivision](#)

Land

| Method | Frontage | Depth | Units | Unit Price | Land Value |
|-------------|----------|-------|------------|------------|------------|
| ACREAGE | 0 | 0 | .593 | 54,400.00 | \$32,259 |
| SQUARE FEET | 0 | 0 | 61,155.000 | 3.00 | \$183,465 |

Building Information

| # | Description | Year Built | Fixtures | Base Area | Total SF | Living SF | Ext Wall | Adj Value | Repl Value | Appendages |
|---|-------------|------------|----------|-----------|----------|-----------|------------|-----------|------------|--------------|
| 1 | BARN/SHEDS | 1979 | | 1,352.00 | 1,352.00 | 1,352.00 | SIDING AVG | \$5,473 | \$13,682 | Descriptic A |

Permits

| Permit # | Type | Agency | Amount | CO Date | Permit Date |
|----------|------|--------|--------|---------|-------------|
| | | | | | |

Extra Features

| Description | Year Blt | Units | Value | Cost New |
|--------------------|----------|-------|-------|----------|
| WOOD CARPORT NO FL | 1979 | 475 | \$571 | \$1,428 |

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Parcel: 29-21-31-300-009B-0000

Owner: THOMPSON SAMUEL & LUCILLE

Property Address: CONNECTION PT OVIEDO, FL 32765

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Parcel: 29-21-31-300-009B-0000

Value Summary

Property Address: CONNECTION PT

Owner: THOMPSON SAMUEL & LUCILLE

Mailing: 2530 CONNECTION PT
OVIEDO, FL 32765Subdivision Name: [\[View Plat\]](#)

Tax District: 01-COUNTY-TX DIST 1

Exemptions:

DOR Use Code: 99-ACREAGE NOT AGRICULTURAL

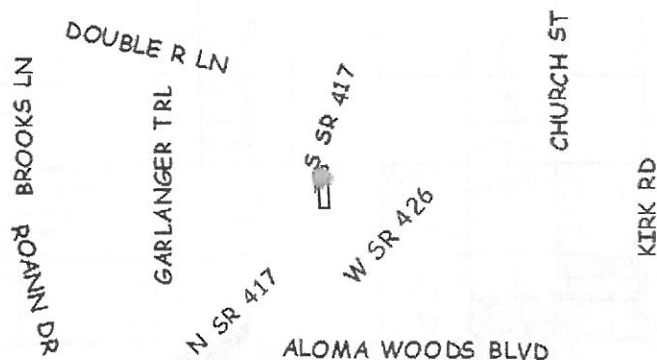
| | 2013 Working Values | 2012 Certified Values |
|-----------------------------|---------------------|-----------------------|
| Valuation Method | Cost/Market | Cost/Market |
| Number of Buildings | 0 | 0 |
| Depreciated Bldg Value | | |
| Depreciated EXFT Value | | |
| Land Value (Market) | \$99,008 | \$99,008 |
| Land Value Ag | | |
| <u>Just/Market Value **</u> | \$99,008 | \$99,008 |
| Portability Adj | | |
| Save Our Homes Adj | \$0 | \$0 |
| Amendment 1 Adj | \$0 | \$0 |
| Assessed Value | \$99,008 | \$99,008 |

Tax Amount without SOH: \$1,522

2012 Tax Bill Amount \$1,522Tax Estimator

Save Our Homes Savings: \$0

* Does NOT INCLUDE Non Ad Valorem Assessments



| | | | | | | | |
|------------|--------------------------|------|-----------|---|---|---------|--------|
| Map | Aerial | Both | Footprint | + | - | Extents | Center |
| Larger Map | Dual Map View - External | | | | | | |

Legal Description

LEG SEC 29 TWP 21S RGE 31E W 131.8 FT OF E 922.6 FT OF N 1/2 OF NW 1/4 OF SW 1/4 (LESS RDS)

Tax Details

| Taxing Authority | Assessment Value | Exempt Values | Taxable Value |
|------------------------------------|------------------|---------------|---------------|
| County General Fund | \$99,008 | \$0 | \$99,008 |
| Schools | \$99,008 | \$0 | \$99,008 |
| Fire | \$99,008 | \$0 | \$99,008 |
| Road District | \$99,008 | \$0 | \$99,008 |
| SJWM(Saint Johns Water Management) | \$99,008 | \$0 | \$99,008 |
| County Bonds | \$99,008 | \$0 | \$99,008 |

Sales

| Deed | Date | Book | Page | Amount | Vac/Imp | Qualified |
|------|------|------|------|--------|---------|-----------|
| | | | | | | |

[Find Comparable Sales within this Subdivision](#)

Land

| Method | Frontage | Depth | Units | Unit Price | Land Value |
|---------|----------|-------|-------|------------|------------|
| ACREAGE | 0 | 0 | 1.820 | 54,400.00 | \$99,008 |

Building Information

Permits

| Permit # | Type | Agency | Amount | CO Date | Permit Date |
|----------|------|--------|--------|---------|-------------|
| | | | | | |

Extra Features

| Description | Year Blt | Units | Value | Cost New |
|-------------|----------|-------|-------|----------|
| | | | | |

| | | | |
|--------|-------------|--------------|------------|
| < Back | Save Layout | Reset Layout | New Search |
|--------|-------------|--------------|------------|



Parcel: 29-21-31-300-010A-0000

Owner: THOMPSON SAMUEL & LUCILLE

Property Address: CONNECTION PT OVIEDO, FL 32765

[< Back](#) [Save Layout](#) [Reset Layout](#) [New Search](#)

Parcel: 29-21-31-300-010A-0000

Value Summary

Property Address: CONNECTION PT

Owner: THOMPSON SAMUEL & LUCILLE

Mailing: 2530 CONNECTION PT
OVIEDO, FL 32765Subdivision Name: [\[View Plat\]](#)

Tax District: 01-COUNTY-TX DIST 1

Exemptions:

DOR Use Code: 99-ACREAGE NOT AGRICULTURAL

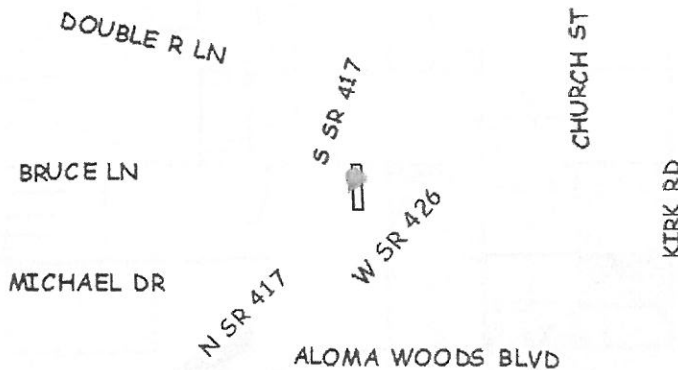
| | 2013 Working Values | 2012 Certified Values |
|-----------------------------|---------------------|-----------------------|
| Valuation Method | Cost/Market | Cost/Market |
| Number of Buildings | 0 | 0 |
| Depreciated Bldg Value | | |
| Depreciated EXFT Value | | |
| Land Value (Market) | \$104,448 | \$104,448 |
| Land Value Adj | | |
| <u>Just/Market Value **</u> | \$104,448 | \$104,448 |
| Portability Adj | | |
| Save Our Homes Adj | \$0 | \$0 |
| Amendment 1 Adj | \$0 | \$0 |
| Assessed Value | \$104,448 | \$104,448 |

Tax Amount without SOH: \$1,605

2012 Tax Bill Amount \$1,605Tax Estimator

Save Our Homes Savings: \$0

* Does NOT INCLUDE Non Ad Valorem Assessments



| | | | | | | | |
|------------|--------------------------|------|-----------|---|---|---------|--------|
| Map | Aerial | Both | Footprint | + | - | Extents | Center |
| Larger Map | Dual Map View - External | | | | | | |

Legal Description

LEG SEC 29 TWP 21S RGE 31E W 131.8 FT OF E 527.2 FT OF N 1/2 OF NW 1/4 OF SW 1/4

Tax Details

| Taxing Authority | Assessment Value | Exempt Values | Taxable Value |
|------------------------------------|------------------|---------------|---------------|
| County General Fund | \$104,448 | \$0 | \$104,448 |
| Schools | \$104,448 | \$0 | \$104,448 |
| Fire | \$104,448 | \$0 | \$104,448 |
| Road District | \$104,448 | \$0 | \$104,448 |
| SJWM(Saint Johns Water Management) | \$104,448 | \$0 | \$104,448 |
| County Bonds | \$104,448 | \$0 | \$104,448 |

Sales

| Deed | Date | Book | Page | Amount | Vac/Imp | Qualified |
|------|------|------|------|--------|---------|-----------|
| | | | | | | |

[Find Comparable Sales within this Subdivision](#)

Land

| Method | Frontage | Depth | Units | Unit Price | Land Value |
|---------|----------|-------|-------|------------|------------|
| ACREAGE | 0 | 0 | 1.920 | 54,400.00 | \$104,448 |

Building Information

Permits

| Permit # | Type | Agency | Amount | CO Date | Permit Date |
|----------|------|--------|--------|---------|-------------|
| | | | | | |

Extra Features

| Description | Year Blt | Units | Value | Cost New |
|-------------|----------|-------|-------|----------|
| | | | | |

| | | | |
|--------|-------------|--------------|------------|
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